# I. VISN 5 Capitol Health Care System

Washington, DC VAMC

II. Date of Visit: July 1, 2003

# III. Sites Visited During Trip

- a. Washington, DC VAMC
- b. Armed Forces Retirement Home \*\*

## IV. Commissioners/Staff in Attendance

Commissioner Jo Ann Webb Commissioner Charles Battaglia

(\*\*Mr. Battaglia did not participate in the Armed Forces Retirement Home Visit.)

Commission Staff: Rebecca Wiley

## V. Summary of Meeting with VISN/Medical Center Leadership

## i. Names and titles of Attendees:

VISN 5:

Dr. James Nocks, Network Director

Mr. Ken Backer, Capital Asset Manager

DC VAMC:

Mr. Sanford Garfunkel, Medical Center Director

Mr. David West, Associate Director

Madhulika Agarwal, M.D., ACOS/Ambulatory Care

Ms. Terry Ross. Executive Officer

Ms. Kathleen Zeiler, Chief/Nursing Service

Mr. Earl Newsome, Executive Assistant to the Director

Mr. Pedro Garcia, Chief/Engineering Service

Ms. Michelle Spivak, Acting Public Affairs Director

Mr. Nathaniel Banks, Program Analyst, Mental Health Care Service Line

Patrick Joyce, M.D., Acting ACOS/Education (in absence of Dr. Ross

Fletcher, Chief of Staff)

Richard Rosse, M.D., Staff Psychiatrist, Mental Health Care Service Line

## ii. VISN/Medical Center Leadership Meeting Forum

The meeting was an informal session with Dr. Nocks beginning the session with a brief overview of the Washington DC market. A thorough review of the VISN 5 markets had been completed on Monday June 30, 2003 at the Baltimore VAMC so was not necessary at this meeting.

Mr. Sanford Garfunkel presented an overview of the Washington DC market enrollee projections (29% increase) and market penetration (26% increase) for the 20-year period, workload projections for the outpatient arena and selected Planning Initiatives and possible solutions. The focus of the discussion centered on the needed addition of

a 155,000 square foot outpatient facility, expansion of CBOCs and possible DoD Joint Venture with Fort Belvoir. Inpatient initiatives focused on the need for inpatient psychiatry bed demand with realignment of 22 beds from Perry Point. There is a plan to realign 77 beds from the Martinsburg VAMC Domiciliary by sublease of space into a DoD Enhanced Use Lease project at the Armed Forces Retirement home. Mr. Pedro Garcia, Chief, Engineering Service presented a detailed overview of space issues and construction options.

#### iii. What did we learn?

- The Washington DC VAMC has significant growth for the 10 and 20 year CARES planning cycle and also projects increased market penetration. They have adequately addressed outpatient and specialty outpatient needs using a variety of different options, with focus on the clinical addition.
- 2. Mental health issues have been addressed in the market. The need for expansion of psychiatric services and Domiciliary beds to serve the veterans in the DC area who currently are relocated to the Martinsburg VAMC Domiciliary and related programs thru a DOD Enhance Use Lease project would further develop a comprehensive range of care modalities and would serve the veterans in the DC area in their home community.
- 3. The VAMC and the Armed Forces Retirement Home has additional potential for DoD joint venture sharing after renovation is completed at the Armed Forces Retirement home for Domiciliary beds.
- There has been constant communication with the stakeholders throughout the CARES process and Stakeholders in this VISN are knowledgeable and supportive of all planning initiatives.

## iv. Outstanding Questions/Follow-up Items

- 1. What are the top CARES priorities for VISN 5?
- 2. If the Outpatient addition is completed, will there be adequate staffing available?
- 3. Are there other unexplored opportunities for joint ventures with DoD given the many DoD facilities in the area and in close proximity to the VAMC?
- 4. Are there other opportunities with the Armed Forces Retirement home (such as Nursing home Care beds) in addition to the 77 beds proposed Domiciliary?
- 5. Are there opportunities for realignment in this VISN as only enhancements in this VISN were presented?

#### VI. Stakeholder Meeting

## i. Stakeholders Represented

Unions:

Ms. Donna King, President, DC Nurses Association

Ms. Gloria Wiggs, American Federation of Government Employees

## VSOs:

Mr. BIII Dozier, Veterans of Foreign Wars

Mr. Jerry Miserandino, Veterans of Foreign Wars

Mr. Tom Miller, Blinded Veterans

Mr. Walter Bledsoe, The American Legion

# DC Mayor's Advisory Committee on Veterans' Affairs:

Mr. Kerwin Miller

### VISN 5:

Dr. James Nocks, Network Director Mr. Ken Backer, Capital Asset Manager

#### DC VAMC:

Mr. Sanford Garfunkel, Medical Center Director

Mr. David West, Associate Director

Madhulika Agarwal, M.D., ACOS/Ambulatory Care

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## ii. Summary of Stakeholder Meeting

An informal luncheon was held. Mr. Battaglia presented an overview of the purpose of the CARES Commission and individually sought input from each stakeholder.

The group indicated they had been involved in the CARES process over the past two years and were comfortable with the VISN 5 plan. Concern was expressed that changes that now might be made by Dr Roswell to the draft plan that were sent out to VISNS most recently would not have input from stakeholders and the only opportunity for input would be at the CARES Commission Hearings. There was general feeling that in the "second go around" the VSOs might be left out.

Mr. Miller, Blinded Veterans, stated care for the blinded veterans was good and even though VISN 5 does not have an inpatient Blind Rehabilitation center, services from West Haven are excellent. He expressed concern about other VISN initiatives where facilities with Blind Rehabilitation Centers might be targeted for closure. (Augusta and Waco, Texas)

Mr. Dozier, VFW, stated the 18 facilities that were targeted on Dr Roswell's current "hit" list were all long term care and psychiatric facilities and it would appear that the VA was trying to get out of the long term care business. He also expressed concern with limited access to military bases when CBOCs are located on military bases.

Ms. King, from the DC Nurses Association expressed concerns that adequate staffing would be needed with clinical additions. Nurse's salaries were not competitive with the private sector, making recruitment difficult. The Chief nurse indicated less then 10% RN vacancy rate and stated the DC medical center was in application for magnet hospital status. Noted was the fact the nursing shortage is a national issue as is recruitment of some subspecialty medical.

Other issues such as transportation issues between CBOCs and the DC medical center were shared by the VSOs.

The stakeholders were then asked if they thought the CARES process would produce any outcome? The consensus centered on if funds would be appropriated to make the substantial changes that would be needed. The mission of the VA must remain constant in order to implement a 10 and 20-year plan.

## VI. VISN Related Comments

None

Submitted by Rebecca Wiley, Commission Staff

Approved by: Charles Battaglia, Commissioner
Jo Ann Webb, Commissioner